SERFF Tracking Number: AMLC-126393454 State: Arkansas
Filing Company: Globe Life and Accident Insurance Company State Tracking Number: 44149

Company Tracking Number: 2010ARGMSX

TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A

Standard Plans

Product Name: 2010 Globe Individual Standardized Medicare Supplement

Project Name/Number: 2010 Annual Rate Filing/2010ARGMSx

Filing at a Glance

Company: Globe Life and Accident Insurance Company

Product Name: 2010 Globe Individual SERFF Tr Num: AMLC-126393454 State: Arkansas

Standardized Medicare Supplement

TOI: MS05I Individual Medicare Supplement - SERFF Status: Closed-Approved- State Tr Num: 44149

Standard Plans Closed

Sub-TOI: MS05I.001 Plan A Co Tr Num: 2010ARGMSX State Status: Approved-Closed

Filing Type: Rate

Reviewer(s): Stephanie Fowler

Author: Sue Fisher

Disposition Date: 01/04/2010

Author: Sue Fisher Disposition Date: 01/04/2010

Date Submitted: 11/20/2009 Disposition Status: Approved-

Closed

Implementation Date Requested: 01/01/2010 Implementation Date: 01/04/2010

State Filing Description:

General Information

Project Name: 2010 Annual Rate Filing Status of Filing in Domicile: Pending

Project Number: 2010ARGMSx Date Approved in Domicile:

Requested Filing Mode: Review & Approval Domicile Status Comments: A filing was

submitted to Nebraska our state of Domicile on

11/20/09 and is pending review

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact: 5%

Market Type: Individual

Group Market Size:

Group Market Type:

Filing Status Changed: 01/04/2010 Explanation for Other Group Market Type:

State Status Changed: 01/04/2010

Deemer Date: Created By: Sue Fisher

Submitted By: Sue Fisher Corresponding Filing Tracking Number:

Filing Description:

Attached is our 2010 Annual Rate Filing for Individual Standardized Medicare Supplement Policy Forms. We are requesting rate changes by policy form as indicated on our Rate Filing Summary Pages and as listed below.

GMSA, GMSA06 +5.0%

SERFF Tracking Number: AMLC-126393454 State: Arkansas
Filing Company: Globe Life and Accident Insurance Company State Tracking Number: 44149

Company Tracking Number: 2010ARGMSX

TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A

Standard Plans

Product Name: 2010 Globe Individual Standardized Medicare Supplement

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GMSB, GMSB06 +5.0% GMSC, GMSC06 +5.0% GMSF, GMSF06 +5.0%

An Actuarial Memorandum, premium rate schedule, and other supporting documentation are provided for your consideration.

Company and Contact

Filing Contact Information

Sue Fisher, Rate Compliance Specialist sfisher@torchmarkcorp.com 3700 S. Stonebridge Drive 972-569-3241 [Phone]
McKinney, TX 75070 972-569-3679 [FAX]

Filing Company Information

Globe Life and Accident Insurance Company CoCode: 91472 State of Domicile: Nebraska 204 North Robinson Avenue Group Code: 290 Company Type: Life and Health

Oklahoma City, OK 73102 Group Name: Liberty National State ID Number:

(405) 270-1400 ext. [Phone] FEIN Number: 63-0782739

Filing Fees

Fee Required? Yes
Fee Amount: \$200.00
Retaliatory? No

Fee Explanation: $$50.00 \times 4 \text{ filings} = 200.00

Per Company: No

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

Globe Life and Accident Insurance Company \$200.00 11/20/2009 32208487

Company Tracking Number: 2010ARGMSX

TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A

Standard Plans

Product Name: 2010 Globe Individual Standardized Medicare Supplement

Project Name/Number: 2010 Annual Rate Filing/2010ARGMSx

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved- Closed	Stephanie Fowler	01/04/2010	01/04/2010

Company Tracking Number: 2010ARGMSX

TOI: MS051 Individual Medicare Supplement - Standard Plans Sub-TOI: MS051.001 Plan A

Product Name: 2010 Globe Individual Standardized Medicare Supplement

Project Name/Number: 2010 Annual Rate Filing/2010ARGMSx

Disposition

Disposition Date: 01/04/2010 Implementation Date: 01/04/2010

Status: Approved-Closed

Comment: The requested rate increase has been approved. This approval is subject to the following:

- Increases will not be given more frequently than once in a twelve-month period
- Both the insured and agent shall be notified by the insurer of its intention to increase the rate for renewal not less than thirty (30) days prior to the effective date of the renewal.

Company Name:	Overall % Indicated	Overall % Rate Impact:	Written Premium Change for	# of Policy Holders Affected for this	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
	Change:		Change for	Affected for this	this Program:	requirea):	requirea):
			this	Program:			
			Program:				
Globe Life and Accident	5.000%	5.000%	\$	14	\$	5.000%	5.000%
Insurance Company							

Company Tracking Number: 2010ARGMSX

TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A

Standard Plans

Product Name: 2010 Globe Individual Standardized Medicare Supplement

Project Name/Number: 2010 Annual Rate Filing/2010ARGMSx

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Health - Actuarial Justification	Accepted for	No
		Informational Purposes	5
Supporting Document	2010 Plan A Supporting Documents	Accepted for	No
		Informational Purposes	5
Supporting Document	2010 Plan B Supporting Documents	Accepted for	No
		Informational Purposes	3
Supporting Document	2010 Plan C Supporting Documents	Accepted for	No
		Informational Purposes	3
Supporting Document	2010 Plan F Supporting Documents	Accepted for	No
		Informational Purposes	3
Rate	2010 Plan A Rate Page(s)	Approved	Yes
Rate	2010 Plan B Rate Page(s)	Approved	Yes
Rate	2010 Plan C Rate Page(s)	Approved	Yes
Rate	2010 Plan F Rate Page(s)	Approved	Yes

Company Tracking Number: 2010ARGMSX

TOI: MS051 Individual Medicare Supplement - Standard Plans Sub-TOI: MS051.001 Plan A

Product Name: 2010 Globe Individual Standardized Medicare Supplement

Project Name/Number: 2010 Annual Rate Filing/2010ARGMSx

Rate Information

Rate data applies to filing.

Filing Method: SERFF

Rate Change Type: Increase

Overall Percentage of Last Rate Revision: 0.000%

Effective Date of Last Rate Revision:

Filing Method of Last Filing: SERFF

Company Rate Information

Company Name:	Overall %	Overall % Rate	Written	# of Policy	Written	Maximum %	Minimum %
	Indicated	Impact:	Premium	Holders	Premium for	Change (where	Change (where
	Change:		Change for	Affected for this	this Program:	required):	required):
			this	Program:			
			Program:				
Globe Life and Accident	5.000%	5.000%		14		5.000%	5.000%

Company Tracking Number: 2010ARGMSX

TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A

Standard Plans

Product Name: 2010 Globe Individual Standardized Medicare Supplement

Project Name/Number: 2010 Annual Rate Filing/2010ARGMSx

Rate/Rule Schedule

Schedule Document Name: Item Status:	Affected Form Rate Numbers: Action:* (Separated with commas)	Rate Action Information	n: Attachments
Approved 2010 Plan A Rate 01/04/2010 Page(s)	GMSA, GMSA06 Revised	Previous State Filing Number:	41233 / 2010 AR Plan A SERFF # Rate Page(s).pdf AMLC- 1259641 58
		Percent Rate Change Request:	5.000
Approved 2010 Plan B Rate 01/04/2010 Page(s)	GMSB06, GMSB Revised	Previous State Filing Number:	41233 / 2010 AR Plan B SERFF # Rate Page(s).pdf AMLC- 1259641 58
		Percent Rate Change Request:	5.000
Approved 2010 Plan C Rate 01/04/2010 Page(s)	GMSC06, GMSC Revised	Previous State Filing Number:	41233 / 2010 AR Plan C SERFF # Rate Page(s).pdf AMLC- 1259641 58
		Percent Rate Change Request:	5.000
Approved 2010 Plan F Rate 01/04/2010 Page(s)	GMSF06, GMSF Revised	Previous State Filing Number:	41233 / 2010 AR Plan F SERFF #Rate Page(s).pdf

SERFF Tracking Number: AMLC-126393454 State: Arkansas

Filing Company: Globe Life and Accident Insurance Company State Tracking Number: 44149

Company Tracking Number: 2010ARGMSX

TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A

Standard Plans

Product Name: 2010 Globe Individual Standardized Medicare Supplement

Project Name/Number: 2010 Annual Rate Filing/2010ARGMSx

AMLC-

1259641

58

Percent Rate Change

5.000

Request:

Oklahoma City, Oklahoma

Policy Form GMSA / GMSA06

2010 Annual Medicare Rate Filing

ARKANSAS

Issue				Current	Proposed				
Age				Annual	Annual				
(Male or Female)				Premium	Premium				
All Ages				\$1,037	\$1,089				
Modal Premium Factors: Semi-Annual Quarterly	= Annual = Annual			(rounded to nea	,				
Monthly	= Annual			(rounded to nea	,				
Bank Draft	= (Modal	Prer		- \$ 2.00	. ,				
For Company Use: Plan Code J05									

Oklahoma City, Oklahoma

Policy Form GMSB / GMSB06

2010 Annual Medicare Rate Filing

ARKANSAS

Issue				Current	Proposed				
Age				Annual	Annual				
(Male or Female)				Premium	Premium				
All Ages				\$1,719	\$1,805				
Modal Premium Factors: Semi-Annual Quarterly	= Annu	al *	.260	(rounded to nea	r dollar)				
Monthly	= Annu			(rounded to nea	r \$0.50)				
Bank Draft	= (Mod	al Pre	mium)	- \$ 2.00					
For Company Use: Plan Code J06									

Oklahoma City, Oklahoma

Policy Form GMSC / GMSC06

2010 Annual Medicare Rate Filing

ARKANSAS

Issue				Current	Proposed				
Age				Annual	Annual				
(Male or Female)				Premium	Premium				
All Ages				\$1,970	\$2,069				
Modal Premium Factors: Semi-Annual				(rounded to nea	,				
Quarterly	= Ann			(rounded to nea	•				
Monthly	= Ann			(rounded to nea	r \$0.50)				
Bank Draft	= (Mo	dal Pre	mium)	- \$ 2.00					
For Company Use: Plan Code J07									

Oklahoma City, Oklahoma

Policy Form GMSF / GMSF06

2010 Annual Medicare Rate Filing

ARKANSAS

Issue				Current	Proposed				
Age				Annual	Annual				
(Male or Female)				Premium	Premium				
All Ages				\$1,986	\$2,085				
Modal Premium Factors: Semi-Annual Quarterly Monthly Bank Draft	= Annual = Annual	*	.260 .088	(rounded to nea (rounded to nea (rounded to nea - \$ 2.00	r dollar)				
For Company Use: Plan Code J08									